# APPLICATION DEADLINE MAY 31, 2003

# 2003-2004 Tier II Subsistence Hunting Permit Application

See back for instructions

Applications will not be accepted over the counter. Apply over the Internet:

| Department Use Only: |  |
|----------------------|--|
|                      |  |
|                      |  |
|                      |  |

Mail to: ADF&G Tier II Permit Applications P. O. Box 228080

| http://www.wc.adfg.state.ak.us/                                |                  |                |              |                      |                |             |         |        |         |        |                   | Anchorage, AK 99522-8080 |         |                     |             |             |          |               |         |          |           |                     |           |             |
|--|------------------|----------------|--------------|----------------------|----------------|-------------|---------|--------|---------|--------|-------------------|--------------------------|---------|---------------------|-------------|-------------|----------|---------------|---------|----------|-----------|---------------------|-----------|-------------|
| 1. Social Security Number                                      | (optional)       |                | 2.           | Date of Birt         | th (MM-D       | D-YYYY      | ′)      |        |         | 3.     | Daytir            | ne Pho                   | ne Nu   | mber (8             | AM - 5      | PM M-       | F)       |               |         | _        |           |                     |           |             |
|  | -                |                |              | -                    | -              | _           |         |        |         |        |                   |                          | -       |                     | Ш           | _           |          |               |         |          | ΑP        | PLY                 | EAR       | LY!         |
| 4. First Name  |                  |                |              | MI                   | 5. Last        | Name        |         |        |         |        |                   |                          |         |                     | _           |             | _        |               | _       |          |           | you pi              |           |             |
|  |                  |                |              |                      |                |             |         |        |         |        |                   |                          |         |                     |             |             |          |               |         |          |           | rtime (<br>one nu   |           |             |
| 6. Mailing Address   |                  |                |              |                      |                |             |         |        |         |        |                   |                          |         | -                   |             |             |          |               |         | - [      | •         | ttemp               |           |             |
|  |                  |                |              |                      |                |             |         |        |         |        |                   |                          |         |                     |             |             |          |               |         |          | •         | ou to               |           |             |
| 7. City  |                  |                |              |                      |                |             |         |        |         |        |                   |                          | 8. Sta  | te                  | 9           | . Zip Co    | de       |               | _       |          |           | plication<br>In pra |           |             |
|  |                  |                |              |                      | П              |             |         |        |         |        | 1                 |                          |         |                     | Γ           |             |          | П             |         |          |           | time p              |           |             |
| 10. Physical Address (Stre                                     | et address, if d | lifferent from | n mailing ac | ddress)              |                |             |         |        | ш       |        | <b>_</b><br>11. € | L<br>Enter th            | ne nam  | <b></b><br>ie of yo | L<br>ur com | munity o    | of princ | cipal re      | sidenc  | e (see   | Tier II : | Supplem             | ent)      |             |
|  |                  |                |              |                      |                |             |         |        |         |        |                   |                          |         |                     |             |             |          |               |         |          |           |                     |           |             |
| 12. Residency: How long<br>(Enter Y                            |                  | ed in Alaska   | ? 13. W      | Vhat Tier II h       | hunt are y     |             |         |        |         |        |                   | lication                 | n.      |                     |             | ying for    |          |               |         | for this | spec      | ies, is th          | is hunt   | your        |
| <u> </u>   | TÍ .             |                |              | `                    | - [            | т           | Т       | П      |         |        | ,                 |                          |         |                     |             | 4           | 2 3      | $\overline{}$ | Ė       | 6 7      | 8         | 9                   |           |             |
|  |                  |                |              |                      | L              | <u>'</u>    |         | Щ      |         |        |                   |                          |         |                     |             | Ш           | 2 3      | 4             | 5       | 0 1      | 0         | Э                   |           |             |
|  | Qu               | estions        | 14-18        | are SC               | ORED           | - if a      | box     | is n   | ot fi   | lled i | n, yo             | ou w                     | ill re  | ceiv                | e the       | min         | imu      | m sc          | core    |          |           |                     |           |             |
| 14. How many years   | s have YOU       | U hunted       | or eater     | n meat fr            | rom <u>thi</u> | is gan      | ne po   | pula   | tion    | rom 1  | this I            | nunt a                   | area'   | ? Inc               | lude        | years       | you      | would         | d hav   | е        |           |                     | $\top$    | 1           |
| hunted this population population.                             | on but did n     | not becau      | se the h     | unt was              | cancell        | ed or       | you v   | vere   | unsuc   | cessf  | ul in (           | obtain                   | ning a  | a drav              | ving c      | r Tier      | II pe    | rmit f        | or thi  | is       |           | (Ent                | er Years  | s)          |
|  |                  |                |              |                      |                |             |         |        |         |        |                   |                          |         |                     |             |             |          |               |         |          |           | (=                  | 1         | 1           |
| <ol><li>15. What is the maxi<br/>hunted or eaten mea</li></ol> |                  |                |              |                      |                |             |         |        |         |        |                   |                          |         |                     |             |             |          |               |         |          |           |                     | or Voor   | ]           |
| population but did no  | ot because t     | the hunt       | was cand     | celled or            | the hou        | usehol      | d mer   | mber   | was     |        |                   |                          |         |                     |             |             |          |               |         |          |           | (EIII               | er Years  | 5)          |
| this population. <b>Ente</b> First Name                        | r informati      | on reque       |              | this Hou<br>ast Name | usehol         | d Men       | nber l  | belov  | v:      |        |                   | Dot                      | to of D | irth (MN            | 1/DD/\\     | ^           | Dooid    | onov          |         | Coolol C | oourit    | Numbe               | r (antio  | 201)        |
| First Name   | $\Box$           |                |              | ast Name             |                | П           | Т       | П      | Т       | П      | $\neg$            | Dal                      | le oi b | itui (iviiv         | 1/00/1      |             | Resid    | T             | П       | 30Ciai 3 | ecuni     | / Numbe             | i (optioi | iai)        |
|  |                  |                | L            |                      | Ш              | Ш           |         | Ш      |         | Ш      |                   | Ш                        | Ш       |                     | Щ           |             |          |               | Ш       |          |           | Ш                   | Ш         |             |
| 16a. In the last 5-year  | ars what is      | the total      | number       | of each              | specie         | s of hi     | ia aar  | me ai  | nimal   | harve  | sted              | for hi                   | ıman    | cons                | umnti       |             | Years i  | ,             | rrent   | meml     | ners      | of vou              | r hous    | ehold       |
| including yourself? F  | Please inclu-    | de anima       | als harve    | sted any             | where          | within      | the s   |        |         |        |                   |                          |         |                     |             |             |          |               |         |          |           |                     |           |             |
| answer as accurately   | as possible      | e. (Write t    | the numb     | per in app           | propriat       | e boxe      | es)     | Мо     | ose     | ]      | Γ                 | Carib                    | oou     |                     | Γ           | Dee         | r        |               | В       | lack Be  | ar        |                     | Mu        | skox        |
| Example: If your hou   |                  |                |              |                      |                |             |         |        |         | Class  |                   |                          |         | 0-                  |             |             | 一        | EII.          | ┪       |          | ╌         | Diana               | ╌         |             |
| last 5-years, write (5)  | in the moo       | se box ar      | nd (10) in   | the caril            | bou box        | x, etc.     |         |        |         | She    | ep                |                          | L       | Go                  | at          |             | L        | Elk           |         |          | L         | Bison               |           |             |
|  | 16b. Hov         | w many         | of the a     | animals              | listed         | l abov      | e ca    | me 1   | from    | the 1  | Tier I            | l pop                    | oulat   | ion y               | ou a        | re ap       | plyi     | ng fo         | or in   | Que      | stior     | 13?                 |           |             |
| See Tier II  | 17. Over t       | he nast v      | oar in w     | hat comn             | nunity c       | did you     |         | _      | _       |        | _                 |                          | _       | _                   |             | _           | _        | _             | _       |          | _         | _                   | 一         | _           |
| Supplement   | buy most         |                |              | riat comin           | ilullity C     | aid you     | •       |        |         |        |                   |                          |         |                     |             |             |          |               |         |          |           |                     | $  \  $   |             |
| for List of  | 18. Over t       | ho noot v      | oor in w     | hat aamn             | nunity c       | did voi     |         |        |         |        | (                 | ENTER                    | R COM   | IMUNIT              | Y NAN       | E FROI      |          |               |         | UPPLE    | MENT      | )                   |           |             |
| Communities  | buy most         |                |              |                      |                |             | '       |        |         |        |                   |                          |         |                     |             |             |          |               |         |          |           |                     |           |             |
|  |                  |                |              |                      |                |             |         |        |         |        | (                 | ENTER                    | R COM   | IMUNIT              | Y NAM       | E FROI      | M LIS    | IN TIE        | ER II S | UPPLE    | MENT      | )                   |           |             |
| Print the names of ot  | her <b>HOUSE</b> | EHOLD N        | IEMBER       | S who a              | re also        | subn        | nittino | a Tiei | r II ap | plicat | ions              | (See                     | defin   | ition o             | n bad       | :k)         |          |               |         |          |           |                     |           |             |
| A. First Name  |                  |                |              | Last Nam             |                |             |         |        |         |        |                   | (                        |         |                     |             | /<br>MM/DD/ | VV)      |               | 9/      | ncial Sa | curity    | Number              | (ontion:  | al)         |
| A. Flist Name  |                  |                | MI           | Last Ivali           | I              | П           | Т       | Т      | П       |        | Т                 | П                        | Г       | Date of             | DII (I      | יטטיוואי    | 11)      | ΙΓ            | T       | JCIAI SE | Curity    | Number              | Ориона    | 11)         |
|  |                  |                | Ш            |                      | Ш              | Ш           |         |        | Ш       |        |                   | Ш                        | L       |                     | Ш           |             |          | L             |         | Ш        |           |                     | Ш         |             |
| B. First Name  |                  |                | MI           | Last Nam             | ne             |             | _       | _      | _       |        | _                 | _                        | _       | Date of             | Birth (I    | MM/DD/      | YY)      |               | Sc      | ocial Se | curity    | Number              | (optiona  | al)         |
|  |                  |                |              |                      |                |             |         |        |         |        |                   |                          |         |                     |             | 1           |          |               |         |          |           | 1                   |           |             |
| C. First Name  |                  |                | MI           | Last Nam             | ne             |             |         |        |         |        |                   |                          | _       | Date of             | Birth (I    | MM/DD/      | YY)      | _             | Sc      | ocial Se | curity    | Number              | (optiona  | al)         |
|  |                  |                |              |                      |                | $\sqcap$    | $\top$  |        |         |        |                   |                          | Γ       |                     | $\prod$     | Т           |          | ΙΓ            | Т       | $\prod$  |           | Т                   |           |             |
| D. Eirot Nome  |                  |                | L            | Look Niciri          | <del></del>    |             |         |        | ш       |        |                   | ш                        | L       | Doto 6              | Dieth /     | AM/DD/      |          | ı L           |         | noio! C- | اللل      | Number-             | (ontine   | -1\         |
| D. First Name  | $\neg \neg \neg$ |                | MI           | Last Nam             |                | $\neg \neg$ | $\neg$  | $\top$ | $\Box$  |        | $\top$            |                          | Г       | Date 01             | ווווים (ו   | MM/DD/      | 11)      | Г             | 1       | Joial Se | curity    | Number              | Optiona   | ai <i>)</i> |
|  |                  |                |              |                      |                |             |         |        |         |        |                   | Ш                        | L       |                     | Ш           |             |          | L             |         |          |           |                     | Ш         |             |

I hereby certify that I am the applicant and all of the information I provide in this application is true and correct, and I understand some of this information is subject to public disclosure. (Signature Required)



SIGNATURE (REQUIRED)



# 2003-2004 Tier II Subsistence Hunting Permit Application Instructions Use blue or black ballpoint pen only.

PRINT IN CAPITAL OR BLOCK LETTERS

| Α | Correct |
|---|---------|
|---|---------|

| A | Incorrec |
|---|----------|
|   |          |

## 1. Social Security Number (OPTIONAL)

Enter your 9-digit social security number.

Enter your birth date. You must be at least 12 years old by starting date of hunt. Example: April 10, 1971 ☐ Month ☐ Day□ Year

#### 3. Daytime Phone Number (Optional)

Enter your daytime phone number where you may be reached Monday-Friday 8:00am - 5:00pm Alaska Daylight time (ADT)

#### 4. - 10. Personal Information (REQUIRED)

Print your first name, middle initial and last name. Be sure to include Jr., III, etc. after you last name. Use only capital letters. Remember: your physical address is required if different from your

mailing address. □ • Your personal information □ □ □ is required in order to mail □

□ □ application results. □ • All applicants will be □  $\hfill\Box$  notified by mail within 15  $\hfill\Box$ 

□ days of the completed □ scoring process.

#### 11. Community of Principal Residence (REQUIRED)

Enter the community name that is the "true and permanent home from which you have no present intention of moving and to which you intend to return

whenever you are away." This is the physical address where you reside the majority of the time and does not include a recreation cabin or a part-time residence. (You may claim only one location as your principal residence.)

#### 12. Residency (REQUIRED)

Enter the total years you have resided in Alaska. Alaska resident is a person who is physically present in Alaska with the intent to remain indefinately and make a home here, and has maintained that person's domicile (home) in Alaska for the 12 consecutive months immediately preceding this application (AS16.05.940(26)).

13. Applying for Tier II Hunt (REQUIRED) Enter the correct hunt number for which you are applying by writing the letter of the species and the 3-digit number for the hunt. 5161

## If you are applying for MORE THAN 1 Tier II hunt for this species

Circle the number that indicates if the hunt you are applying for is your 1st, 2nd, 3rd etc, choice for that species. You may apply for multiple hunts per species, but may only receive one Tier II permit for that species. If you qualify for more than one permit per species, your hunt choice preference determines which permit you will receive.

### Questions 14-18 are SCORED - if a question is left blank, you will receive the minimum score on that question

- 14. Total years YOU have hunted or eaten meat from this population Enter the total number of years you have hunted or eaten meat from this game population you are applying for.
- 1.0 point is awarded for each year, for a maximum of 50 points.
- 15. Total years any one household member has hunted or eaten meat from this population. A household member is any person currently living with you in your principal home, excluding persons boarding or renting within your home or relatives living in separate homes. Enter the total number of years this household member have hunted or eaten meat from this game population you are applying

• .20 points are awarded for each year, for a maximum of 10 points.

| 16a. Write in the appropriate box the total number of each species of big game |
|--|
| animals harvested for human consumption in the last 5-years by you and all     |
| current members of your household.   |

For example, if your household harvested 5 moose and 10 caribou write a 5 in the moose box, write a 10 in the caribou box. If no harvest occurred in the last 5 years for a species write zero in the box.

**16b.** Write in the total number of big game animals **harvested** for human consumption over the last 5-years by you and all current members of your household from the Tier II population you are applying for.

For example, if your household harvested 10 caribou in the last 5-years and 5 were from the Tier II population you are applying for, write in a 5 in the box. If no harvest occurred for this Tier II population, write zero in the box. Example below:

Applicants can score a maximum of 20 points for questions 16a-16b.

| 6a. In the last 5-years, what is the total number of each species of big ga | ame animal harv | ested for human cons | umption by all the  | current members of | f your household  |
|---|-----------------|----------------------|---------------------|--------------------|-------------------|
| cluding yourself? Please include animals harvested anywhere within the      |                 | NOTE: You may be a   | asked to verify the | harvest numbers y  | ou report. Please |
| nswer as accurately as possible. (Write the number in appropriate boxes)    | MEsso           | CAO                  | Our                 | RiaClear           | MiCov             |

Example: If your household harvested 5 moose and 10 caribou in the last 5-years, write (5) in the moose box and (10) in the caribou box, etc.

16b. How many of the animals listed above ca See Tier II Supplement for List of Communities

17. Over the past year, in what community did you buy most of your FOOD?

18. Over the past year, in what community did you buy most of your GASOLINE (automotive fuel)?

| me from the Tier II population you are applying for in Question 13? |    |      |      |     |      |      |      |     |      |        |     |       | 5    |     |    |  |  |  |
|---|----|------|------|-----|------|------|------|-----|------|--------|-----|-------|------|-----|----|--|--|--|
| TOK   |    |      |      |     |      |      |      |     |      |        |     |       |      |     |    |  |  |  |
|   | (I | ENTE | R CC | MMC | UNIT | Y NA | ME F | ROM | LIST | T IN T | IER | I SUI | PPLE | MEN | T) |  |  |  |
| TOK   |    |      |      |     |      |      |      |     |      |        |     |       |      |     |    |  |  |  |
|   | (1 | ENTE | R CC | MMC | UNIT | Y NA | ME F | ROM | LIST | IN T   | IER | I SUI | PPLE | MEN | T) |  |  |  |

17 & 18 Community Questions. Enter the community that correctly answers these questions. See Tier II supplement for a list of Alaska Communities.

Applicants can score a maximum of 10 point for each question.

#### **Definition: Household members**

A household member is any person currently living with you in your principal home, excluding persons boarding or renting within your home or relatives living in separate homes.

### REMEMBER....

- Sign the application.
- Do not send money.
- Use only one hunt number per application.
- Enter or check all required information.
- Each household may be awarded a maximum of one Tier II Moose permit, three Tier II Caribou permits, and one Tier II Muskox permit.
- Applications will not be accepted if postmarked after May 31st, or received after June 10th.
- Applicants may be awarded a maximum of one permit per species.

# Signature (REQUIRED)

Read the certification statement carefully. We must reject applications without a signature.



